FORM D

UNITED STATES
SECURITIES AND EXCHANGE COMMISSION
Washington, D.C. 20549

FORM D



NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, SECTION 4 (6), AND/OR UNIFORM LIMITED OFFERING EXEMPTION

1215644

OMB Approval
Number: 3235-0076

OMB Number:

Prefix

May 31, 2005

Serial

Expires: May 31 Estimated average burden

hours per response...........16.00

SEC USE ONLY

DATE DECEIVED

UNIFORM LIMITED OFFERING EXEMPT	ION DATE RECEIVED
N	
Name of Offering (check if this is an amendment and name has changed, and indicate change.) Common Stock	
Filing Under (check box(es) that apply): Rule 504 Rule 505 Rule 506 Section 4	4(6) ULOE RESERVED TO
Type of Filing: New Filing Amendment	
A. BASIC IDENTIFICATION DATA	< < SEP 9 2003 //
Enter the information requested about the issuer	\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\
Name of Issuer (check if this an amendment and name has changed, and indicate change.)	The same of the sa
OFI, Inc.	
Address of Executive Offices (Number and Street, City, State, Zip Code)	Telephone Number (Including Area Code)
1071 Cheswick Drive, Gurnee, Illinois 60031	(847) 543-0980
Address of Principal Business Operations (Number and Street, City, State, Zip Code)	Telephone Number (Including Area Code)
(If different from Executive Offices)	
Brief Description of Business Development, manufacture and sale of enhanced electrical wiring devices for residential and com	mercial buildings.
Type of Business Organization	(a) (b) (b) (a) (b)
corporation limited partnership, already formed o business trust limited partnership, to be formed	ther (please specify):
Month	Year RED A A AAAR
Actual Date of Incorporation or Organization	9 8 🛛 Actual 🔲 Retimated
Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service Abbreviation for State;	
CN for Canada; FN for other foreign jurisdiction)	CA (THOMSON

GENERAL INSTRUCTIONS

Federal:

Who must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. 15 U.S.C. 77d(6).

When to File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying of ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

ATTENTION

Failure to file notice in the appropriate states will not result in a loss of federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

SEC 1972 (6-02)

of 9

A. BASIC IDENTIFICATION DATA

- 2. Enter the information requested for the following:
 - Each promoter of the issuer, if the issuer has been organized within the past five years;
 - Each beneficial owner having the power to vote or dispose or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer;
 - Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and

 Each general 	and managing pa	rtner of partnership issue	ers.		
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first	, if individual)				
Baker, Gregory E.					
Business or Residence Add 1071 Cheswick Drive, Gur	•		Code)		
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first Jarvis, Stephen	, if individual)				
Business or Residence Add 310 Seminole Drive, Zeph	•		Code)		
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first Simpson, Richard O.	, if individual)				
Business or Residence Add 1670 Duden Drive, Placery			Code)		
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first Montgomery, Steven R.	t, if individual)				
Business or Residence Add 194 Erb St. West, Waterlo	•	•	Code)		
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name firs Barbara Ann Ludden	t, if individual)				
Business or Residence Add 1043 North Pitt Street, Ale	•		Code)		
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name firs Frank-Paul King	t, if individual)				
Business or Residence Ad 6323 Meadow Road, Dalla	•	nd Street, City, State, Zip	Code)		
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name firs Eric Eger	t, if individual)				
Business or Residence Ad 236 Clark Dr., San Mateo	•	nd Street, City, State, Zip	Code)		

(Use blank sheet, or copy and use additional copies of this sheet, as necessary)

A. BASIC IDENTIFICATION DATA 3. Enter the information requested for the following: Each promoter of the issuer, if the issuer has been organized within the past five years; Each beneficial owner having the power to vote or dispose or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer; Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and Each general and managing partner of partnership issuers. Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner Full Name (Last name first, if individual) Paul Schulz Business or Residence Address (Number and Street, City, State, Zip Code) 1071 Cheswick Drive, Gurnee, Illinois 60031 Check Box(es) that Apply: Promoter Beneficial Owner **Executive Officer** Director General and/or Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) **Executive Officer** Check Box(es) that Apply: Promoter Beneficial Owner Director General and/or Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Check Box(es) that Apply: Promoter Beneficial Owner **Executive Officer** Director General and/or Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Beneficial Owner **Executive Officer** Director General and/or Check Box(es) that Apply: Promoter Managing Partner Full Name (Last name first, if individual)

(Use blank sheet, or copy and use additional copies of this sheet, as necessary)

Business or Residence Address (Number and Street, City, State, Zip Code)

		·			B. INFO	DRMATI	ON ABO	UT OFF	ERING				
												Yes	No
1.	Has th	e issuer so	old or does	s the issuer	intend to	sell, to non	-accredited	linvestors	in this offe	ring?		Ä	
				Answ	er also in	Appendix,	Column 2,	if filing u	nder ULOE	3			
2.	What	is the min	imum inve	estment that	will be a	ccepted fro	m any indi	vidual?				\$ 9,975	
												Yes	No
3.	Does	the offerin	g permit j	oint owners	ship of a si	ingle unit?				•••••	•••••	\boxtimes	
4.												ny commiserson to be	
	an ass	ociated pe	erson or ag	ent of a bro	ker or dea	aler register	red with th	e SEC and	or with a s	state or stat	es, list the	name of th	ne broker
				re (5) perso r or dealer		sted are ass	sociated pe	rsons of su	ich a broke	r or dealer	, you may	set forth th	e
Ful	l Name	(Last nan	ne first, if	individual)									
Bus	siness c	r Residen	ce Address	s (Number	and Street	, City, Stat	e, Zip Cod	e)					
Nai	me of A	Associated	Broker or	Dealer									
Sta	tes in V	Vhich Pers	son Listed	Has Solicit	ed or Inte	nds to Soli	cit Purchas	ers					
(Ch	neck "A	.ll States"	or check is	ndividual S	tates)					···· <u>·</u> ···· [All Stat		
-	AL] IL]	[AK] [IN]	[AZ] [IA]	[AR] [KS]	[CA] [KY]	[CO] [LA]	[CT] [ME]	[DE] [MD]	[DC] [MA]	[FL] [MI]	[GA] [MN]	[HI] [MS]	[ID] [MO]
_	AT]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]
_	RI]	[SC]	[SD]	[TN] individual)	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]
rui	ii ivaiiic	(Last Hai	iic mst, m	marviduary									
Bu	siness o	or Residen	ce Addres	s (Number	and Street	, City, Stat	e, Zip Cod	e)					
Na	me of A	Associated	Broker or	Dealer	<u>-</u>								
				Has Solici		nds to Soli	cit Purchas	sers			7 411 6.		
•	neck "A AL]	III States" [AK]	or check i	ndividual S [AR]	(CA]	[CO]	[CT]	[DE]	[DC]	 [FL]] All Stat [GA]	tes [HI]	[ID]
_	IL]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]
-	MT] RI]	[NE] [SC]	[NV] [SD]	[NH] [TN]	[NJ] [TX]	[NM] [UT]	[NY] [VT]	[NC] [VA]	[ND] [WA]	[OH] [WV]	[OK] [WI]	[OR] [WY]	[PA] [PR]
	_			individual)		10.1		[,,,,	[,,,,]		(, , , ,		[1.5]
Bu	siness	or Residen	ice Addres	s (Number	and Stree	t, City, Stat	te, Zip Coo	le)		-			
Na	me of A	Associated	Broker o	r Dealer								 	· · · · · · · · · · · · · · · · · · ·
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`[,	AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]
	IL]	[IN]	[IA]	[KS]	[KY]	[LA] [NM]	[ME] [NY]	[MD] [NC]	[MA] [ND]	[MI] [OH]	[MN] [OK]	[MS] [OR]	[MO] [PA]
	MT]	[NE]	[NV]	[NH]	[NJ] [TX]	[IVIVI]	[VT]	[NC]	[WA]	[Un] [WV]	[WI]	[UK] [WY]	(PA)

(Use blank sheet or copy and use additional copies of this sheet, as necessary)

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

1.

•	Enter the aggregate offering price of securities included in this offering and the total am Enter "0" if answer is "none" or "zero". If the transaction is an exchange offering, chec indicate in the column below the amounts for exchange and already exchanged.	ount already sold. k this box and	
	Type of Security	Aggregate Offering Price	Amount Already Sold
	Debt Equity	\$ <u>0</u> \$ <u>1,684,335.75</u>	\$ <u>0</u> \$ <u>1,684,335.75</u>
	Convertible Securities (including warrants)	\$ 0 \$ 0 \$ 0	\$ 0 \$ 0 \$ 0
	Total	\$ <u>1,684,335.75</u>	\$1,684,335.75
	Answer also in Appendix, Column 3, if filing under ULOE.		
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."		
	o it diswel is note of Zero.	Number Investors	Aggregate Dollar Amount of Purchases
	Accredited Investors	50 5 55	\$ <u>1,643,010.75</u> \$ <u>41,325.00</u> \$ <u>1,684,335.75</u>
	Answer also in Appendix, Column 4, if filing under ULOE.		
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C-Question 1.		
	Type of offering Rule 505 Regulation A Rule 504	Type of Security N/A N/A N/A	Dollar Amount Sold N/A N/A N/A N/A N/A N/A N/A N/A
4.	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.	N/A	\$ <u>N/A</u>
	Transfer Agent's Fees Printing and Engraving Costs. Legal Fees Accounting Fees Engineering Fees Sales Commissions (Specify finder's fees separately) Other Expenses (identify) Postage Total		\$ 1,500 \$ 5,000 \$ 2,500 \$ 1,000 \$ 10,000

	C. OFFERING PRICE,	NUMBER OF INVESTORS, EXPE	NSES A	ND I	USE OF P	ROC	EE	DS
	Question 1 and total expenses furnish	ggregate offering price given in response to P ed in response to Part C-Question 4.a. This d issuer."	lifference				\$_	1,674,335.75
5.	be used for each of the purposes sh furnish an estimate and check the box	usted gross proceeds to the issuer used or process. If the amount for any purpose is not to the left of the estimate. The total of the proceeds to the issuer set forth in response to	t known,					
					Payments to Officers, Directors, & Affiliates			Payments to Others
	Salaries and fees		🛛	\$_	240,000		\$_	345,000
	Purchase of real estate			\$_			\$_	
	Purchase, rental or leasing and	installation of machinery and equipment		\$_			\$_	75,000
	Construction or leasing of plant	t buildings and facilities	🛛	\$_	50,000		\$_	
	this offering that may be used i	(including the value of securities involved n exchange for the assets or securities of rger		\$_			\$_	
	Repayment of indebtedness			\$_			\$_	
				\$_			\$_	764,335.75
	Other (specify) Marketing		🗆	\$				200,000
							_	
			🗆	\$_			\$_	
	Column Totals		🛛	\$_	290,000		\$_	1,384,335.75
	Total Payments Listed (column	totals added)	•••••			\$ <u>1</u>	,674	,335.75
		D. FEDERAL SIGNATUR	RE.					
fol	lowing signature constitutes an underta	be signed by the undersigned duly authoric king by the issuer to furnish to the U.S. Secun ssuer to any non-accredited investor pursuan	rities and I	Excha	ange Commis	ssion,	upo	
Iss	suer (Print or Type)	Signature	1	Date				
OF	FI, Inc.	Donn			9/9/	85		
Na	ame of Signer (Print or Type)	Title of Signer (Print or Type)						
Gr	regory E. Baker	President and Chief Executive Officer						
_								
		ATTENTION						
		ALLENIUN						

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

		E. STATE SIGN	NATURE			
1.	Is any party described in 17 CFR 230.262 provisions of such rule?				Yes	No
	See Appe	endix, column 5, for state res	ponse.			
2.	The undersigned issuer hereby undertakes (17 CFR 239.500) at such times as required	▼	istrator of any state	in which this notice filed,	a notice of	on Form D
3.	The undersigned issuer hereby undertakes to offerees.	to furnish to the state admin	strators, upon writte	en request, information fun	nished by	the issuer
4.	The undersigned issuer represents that the in Offering Exemption (ULOE) of the state exemption has the burden of establishing the	in which this notice is filed	and understands the			
	ne issuer has read this notification and knows to authorized person.	he contents to be true and has	duly caused this not	ice to be signed on its beha	lf by the u	indersigned
Iss	suer (Print or Type)	Signature)	2	Date	-	
O	FI, Inc.	DWZ		9/9/05		
N	ame (Print or Type)	Title (Print or Type)		<u> </u>	•	

President and Chief Executive Officer

Gregory E. Baker

Instruction:
Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice of Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

APPENDIX

1	2		3			5				
	Intend to non-accre investo Stat (Part B-I	edited rs in e	Type of security and aggregate offering price offered in state (Part C-Item 1)	Number	Type of investor and amount purchased in State (Part C-Item 2) Number of Number of					
				Accredited		Number of Nonaccredited				
State	Yes	No		Investors	Amount	Investors	Amount	Yes	No	
AL										
AK										
AZ										
AR										
CA	Х		Common Stock \$1,684,335.75	23	\$662,967	1	\$9,975			
СО		х	Common Stock \$1,684,335.75	1	\$8,065.50					
CT										
DE										
DC								<u> </u>		
FL	-	х	Common Stock \$1,684,335.75	2	\$52,725					
GA										
HI										
ID										
IL	Х	Х	Common Stock \$1,684,335.75	7	\$182,841.75	4	\$31,350			
IN										
IA										
KS										
KY										
LA										
ME										
MD		X	Common Stock \$1,684,335.75	- 1	\$14.250					
MA		X	Common Stock \$1,684,335.75	1	\$14,250					
MI									1	
MN										
MS										

APPENDIX

Intend to sell to non-accredited investors in State (Part B-Item 1) Number of State (Part B-Item 1) Number of Accredited Investors Nonaccredited investors Number of Accredited Investors Number of Accredited Investors Number of Nonaccredited Investors Number of	Ī	2	2	3		1	5				
State Yes No		non-acc invest Sta	oredited ors in ate	and aggregate offering price offered in state		amount purchased in State (Part C-Item 2)					
State Yes No											
MT NE NV NH NJ X Common Stock \$1,684,335.75 Z \$121,381.50 NM NY NC ND OH OK OR PA X \$1,684,335.75 I \$285,000.00 RI SC SD TN TX X Common Stock \$1,684,335.75 TX TX X Common Stock \$1,684,335.75 TY VT VA X Common Stock \$1,684,335.75 WA X Common Stock \$1,684,335.75		Yes	No		Investors	Amount		Amount	Yes	No	
NE											
NV NH NJ	<u> </u>										
NH											
NJ											
X \$1,684,335.75 2 \$121,381.50 NM NY NC ND OH OK OR PA Common Stock SC SD TN TX X Common Stock \$1,684,335.75 \$285,000.00 TX X \$1,684,335.75 \$263,012.25 UT VT VA X Common Stock \$1,684,335.75 \$1 \$9,975 \$1,684,335.75 \$1 \$9,975 \$1,684,335.75 \$1 \$9,975 \$1,684,335.75 \$1 \$9,975 \$1,684,335.75 \$1 \$1,684,335.75 WV WI X Common Stock \$1 \$1,684,335.75 WV WI WI X Common Stock \$1 \$1,684,335.75 WV WI WI WI WI WI WI WI											
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X	OR										
SC SD TN Common Stock TX X S1,684,335.75 7 S263,012.25 UT VT VA X Common Stock \$1,684,335.75 1 \$9,975 WA X Common Stock \$1,684,335.75 1 \$9,975 WV X Common Stock \$1,684,335.75 1 \$9,975 WV X Common Stock \$1,684,335.75 3 \$18,567.75	PA		х		1	\$285,000.00					
SD TN Common Stock S263,012.25 TX X \$1,684,335.75 7 \$263,012.25 UT VA X Common Stock \$1,684,335.75 1 \$9,975 WA X Common Stock \$1,684,335.75 1 \$9,975 WV WI X Common Stock \$3 \$18,567.75	RI										
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TX Common Stock \$1,684,335.75 7 \$263,012.25 UT VT VA X Common Stock \$1,684,335.75 1 \$9,975 WA X Common Stock \$1,684,335.75 1 \$9,975 WV X Common Stock \$1,684,335.75 1 \$9,975 WV X Common Stock \$3,684,335.75 3 \$18,567.75	SD				<u> </u>			<u> </u>			
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WV \$1,684,335.75 WI X Common Stock 3 \$18,567.75	VA		X		1	\$9,975					
WI X Common Stock 3 \$18,567.75	WA		X		1	\$9,975					
	WV										
	WI		X		3	\$18,567.75					

Δ	P	P	F	N	n	TX	•

1	2	2	3			5			
	non-acc invest Sta	o sell to credited cors in ate	Type of security and aggregate offering price offered in state (Part C-Item 1)		amount purc	nvestor and hased in State C-Item 2)		under ULOE atta explana waiver	ification State (if yes, ach ation of granted) -Item 1)
State	Yes	No		Number of Accredited Investors	Amount	Number of Nonaccredited Investors	Amount	Yes	No
WY									
PR									